

# Frosty 5K & Merry Mile

## Saturday, December 9, 2017



	First Name	Last Name	DOB	M/F	5K	Mile	Shirt Size*	BIB #
1								
2								
3								
4								
5								
6								
7								
8								

\*T-shirt Sizes: Please indicate Youth sizes with a "Y". Available sizes: Youth small, medium and large; Adult small, medium, large, extra large, 2XL, 3XL

### Contact Information

Team Name:

Contact Name:

Address:

Phone Number:

Email Address:



**PARKS & RECREATION  
DEPARTMENT**

How did you hear about the event?

- |   |   |
|---|---|
| <input type="checkbox"/> Frisco Athletic Center | <input type="checkbox"/> FriscoFun.org        |
| <input type="checkbox"/> Race Brochure          | <input type="checkbox"/> Previous Participant |
| <input type="checkbox"/> My School              |   |
| <input type="checkbox"/> My Company             |   |
| <input type="checkbox"/> Newspaper              |   |
| <input type="checkbox"/> Word of Mouth          |   |
| <input type="checkbox"/> Other _____            |   |

**\*\*Please turn over to sign release and medical authorization.\*\***

NOTICE: With your signature below, you are signing the  
waiver for each participant you are registering.

RELEASE AND MEDICAL AUTHORIZATION

I, on behalf of myself or the individual being registered (the "registrant,") agree to allow the registrant to participate in the aforementioned activity(ies) and authorize the City employees, volunteers, program directors and/or instructors as Agents for the undersigned to consent to Medical, Surgical, and/or Dental examination and/or any and all other Treatments deemed necessary by medical personnel. I agree pictures taken during program hours may be used for any purpose.

In consideration of the City of Frisco ("the City") allowing the registrant to participate in the above activity(ies) and other good and valuable consideration, the receipt of which is acknowledged, I, on behalf of myself, the registrant (whether myself or someone else), any other minor child or legally incapacitated person for whom I can execute this document, my heirs, assigns and any other person or entity claiming to have legal rights by and through me, release and agree to defend, indemnify, and hold harmless, the City and its employees, from all claims of and/or liability for personal injury, property damage or wrongful death, including, but not limited to, claims or liability due to the negligence, contributory negligence and/or strict products liability of the City and/or its employees resulting from, relating to, or arising out of participation in and/or transportation to or from activity(ies) sponsored or provided by the City, or use of any City facilities.

This is not a waiver of the City's immunity. I warrant that I am authorized to sign this release. I agree to indemnify and defend the City of Frisco if I am not authorized to sign and legally bind the registrant or if the person named herein attempts to rescind this release. If any term of the release is deemed void or voidable, it shall not affect the enforceability of anything else in the release.

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Print Name

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Date

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Signature